Fill in this information to identify your ca	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Shonetta First Name	First Name
	identification (for example, your driver's license or	Michelle Middle Name	 Middle Name
	passport).	Bethune	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Shoneta	
	have used in the last 8	First Name	First Name
	years	Michelle	
	Include your married or	Middle Name	Middle Name
	maiden names.	Murphy	_
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
	your Social Security	xxx - xx - <u>7</u> <u>9</u> <u>6</u> <u>9</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

Del	btor 1 Shonetta Mic	chelle Bethune	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer	✓ I have not used any business names or EIN:	s.		
	Identification Number (EIN) you have used in the last 8 years	5 .	Business name		
	Include trade names ar	Business name	Business name		
	doing business as nam	Business name	Business name		
5.	Where you live	EIN	EIN If Debtor 2 lives at a different address:		
	•	18081 Midway Rd #111			
		Number Street	Number Street		
		Dallas TX 75287			
		City State ZIP Code	City State ZIP Code		
		Dallas County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
		Number Street	Number Street		
		P.O. Box	P.O. Box		
		City State ZIP Code	City State ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
Р	Part 2: Tell the Co	ourt About Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see North for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box.		
	are choosing to file under	Chapter 7			
		Chapter 11			
		Chapter 12			
		Chapter 13			

Deb	Shonetta Michelle	Bethune		Case number (if kno	own)
8.	How you will pay the fee	court f	pay the entire fee when I file my pe for more details about how you may p ith cash, cashier's check, or money o f, your attorney may pay with a credit	pay. Typically, if you a prder. If your attorney i	re paying the fee yourself, you may submitting your payment on your
			I to pay the fee in installments. If y duals to Pay The Filing Fee in Installr	•	
		By law than 1 fee in	est that my fee be waived (You may, a judge may, but is not required to, 50% of the official poverty line that a installments). If you choose this optified Waived (Official Form 103B) and	waive your fee, and mapplies to your family sition, you must fill out the	nay do so only if your income is less ize and you are unable to pay the e Application to Have the Chapter 7
9.	Have you filed for	☑ No			
	bankruptcy within the last 8 years?	Yes.			
		District		When	Case number
		District		MM / DD / `	YYYY
		District		vvnen MM / DD / `	Case number
		District		When	Case number
10.	Are any bankruptcy	☑ No		WIWI 7 DD 7	
	cases pending or being filed by a spouse who is	☐ Yes.			
	not filing this case with	— Debtor		Rela	tionship to you
	you, or by a business partner, or by an	District			Case number,
	affiliate?	_			YYYY if known
		Debtor		Rela	tionship to you
		District			Case number,
				MM / DD / `	YYYY if known
11.	Do you rent your	□ No.	Go to line 12.		
	residence?	✓ Yes.	Has your landlord obtained an evicti	on judgment against y	ou?
			No. Go to line 12.		
			Yes. Fill out Initial Statement A and file it as part of this bankru	-	ment Against You (Form 101A)

Debtor 1		Shonetta Michelle Bethune			Case number (if known)			
P	art 3:	Report About Ar	ıy Bı	usine	sses You Own as a Sole Proprietor			
12.	-	a sole proprietor ull- or part-time s?			Go to Part 4. Name and location of business			
busine individ separa		e proprietorship is a less you operate as an dual, and is not a late legal entity such as loration, partnership, or			Name of business, if any Number Street			
	sole pro	ove more than one prietorship, use a e sheet and attach it etition.			City Check the appropriate box to describe your busine Health Care Business (as defined in 11 U.S.C. Single Asset Real Estate (as defined in 11 U.S.C. § 101(5) Commodity Broker (as defined in 11 U.S.C. § None of the above	C. § 101(27A)) .S.C. § 101(51E 3A))	ZIP Co	ode
Cha Ban are	Chapter Bankruj are you	e you filing under napter 11 of the nkruptcy Code and e you a <i>small busin</i> ess		<i>set ap</i> st rece	filing under Chapter 11, the court must know whether propriate deadlines. If you indicate that you are a soft balance sheet, statement of operations, cash-flow f these documents do not exist, follow the procedure	mall business v statement, an	debtor, you d federal ir	must attach your scome tax return
	debtor?	$ \overline{\checkmark} $	No.	I am not filing under Chapter 11.				
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapter 11, but I am NOT a small the Bankruptcy Code.	l business debi	tor accordir	ng to the definition in	
		C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small busing Bankruptcy Code.	ness debtor ac	cording to t	he definition in the
Pa	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous Property or Any Prope	erty That Ne	eds Imn	nediate Attention
14.	property alleged imminer	Do you own or have any property that poses or is alleged to pose a threat of mminent and identifiable		No Yes.	What is the hazard?			
	safety? any pro	to public health or Or do you own perty that needs ate attention?			If immediate attention is needed, why is it needed?	?		
	perishab livestock	mple, do you own ble goods, or that must be fed, or g that needs urgent			Where is the property? Number Street			
					City		State	ZIP Code

Debtor 1 Shonetta Michelle Bethune

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not require	d to receive a briefing about
credit counselir	ng because of:
☐ Incanacity	I have a mental illness or a me

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Shor		Shonetta Michelle I	ne		Case number (if	Case number (if known)			
Part 6: Answer These Questions for Reporting Purposes						es			
16.	What ki have?	nd of debts do you	16a.		•	vidual pr b.	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
money			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.						
			16c.	State	State the type of debts you owe that are not consumer or business debts.				
17.	Are you Chapte	ı filing under r 7?		No.	I am not filing und	der Chap	ter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	✓	Yes.	-	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do imate that you		1-49 50-99 100-19 200-99			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to h?		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you e your liabilities to		\$100,0	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Debtor 1	Shonetta Michelle	Bethune	Case number (if known)			
Part 7:	Sign Below					
or you	-	I have examined this petition, and I declare and correct.	under penalty of perjury that the information provided is true			
		•	m aware that I may proceed, if eligible, under Chapter 7, 11, 12, erstand the relief available under each chapter, and I choose to			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		•	cealing property, or obtaining money or property by fraud in lt in fines up to \$250,000, or imprisonment for up to 20 years, I 3571.			
		X /s/ Shonetta Michelle Bethune Shonetta Michelle Bethune, Debtor 1	Signature of Debtor 2			
		Executed on <u>04/07/2019</u> MM / DD / YYYY	Executed on MM / DD / YYYY			

Debtor 1	Shonetta Michelle	e Bethune	Case number (if know	Case number (if known)			
represente	not represented by y, you do not need	I, the attorney for the debtor(s) named eligibility to proceed under Chapter 7, relief available under each chapter for the debtor(s) the notice required by 1 certify that I have no knowledge after is incorrect.	, 11, 12, or 13 of title 11, United Sta or which the person is eligible. I also 1 U.S.C. § 342(b) and, in a case in	tes Code, and have explained the concertify that I have delivered to which § 707(b)(4)(D) applies,			
		X /s/ Weldon Reed Allmand Signature of Attorney for Debtor	Date	04/07/2019 MM / DD / YYYY			
		Weldon Reed Allmand					
		Printed name					
		Allmand Law Firm, PLLC Firm Name					
		860 Airport Freeway, Suite 4	01				
		Number Street	•				
		Hurst	TX	76054			
		City	State	ZIP Code			
		Contact phone (214) 265-0123	Email address quest i	ons@allmandlaw.com			
		24027134					
		Bar number	State	_			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this info	ormation to ic	lentify your case	and this filing:		
Debtor 1	Shonetta	Michelle	Bethune		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for	the: NORTHERN D	DISTRICT OF TEXAS		
Case number				_	
(if known)				_	if this is an ed filing
					Ü
Official Form	106A/B				
Schedule A/	B: Property	1			12/15
filing together, bot sheet to this form.	th are equally res On the top of a	sponsible for supply ny additional pages,	Be as complete and accurate as ing correct information. If more write your name and case numbers, Land, or Other Real Es	space is needed, attach a soer (if known). Answer eve	separate ry question.
✓ No. Go to Yes. Wh	o Part 2. ere is the propert	y?	t in any residence, building, land of your entries from Part 1, inclu		
	-	-	rite that number here	_	\$0.00
Part 2: Des	scribe Your V	ehicles			
-		•	n any vehicles, whether they are also report it on Schedule G: Exec	_	-
3. Cars, vans, tr	ucks, tractors, s	port utility vehicles,	motorcycles		
□ No ☑ Yes					
3.1.			an interest in the property?	Do not deduct secured clai	•
Make:	Ford	Check on	e. or 1 only	amount of any secured claim Creditors Who Have Claim	
Model: Year:	Escape 2016	Debto	or 2 only	Current value of the	Current value of the
Approximate mileag			or 1 and Debtor 2 only ast one of the debtors and another	entire property? \$10,900.00	portion you own? \$10,900.00
Other information:		V / (100	actions of the deptoto and another	\$10,900.00	\$10,900.00
2016 Ford Escap	oe (approx. 56,		k if this is community property instructions)		
•	•	•	recreational vehicles, other vehit, fishing vessels, snowmobiles, m	•	
✓ No ☐ Yes					
	-	-	of your entries from Part 2, incl rite that number here	· · · · _	\$10,900.00

Deb	otor 1	Shonetta Michelle Bethune C	ase number (if known)	
P	art 3:	Describe Your Personal and Household Items		
		or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example	old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware		
	□ No ☑ Yes.	Describe See continuation page(s).		\$110.00
7.	Electror Example	nics es: Televisions and radios; audio, video, stereo, and digital equipment; compo music collections; electronic devices including cell phones, cameras, med	•	
	□ No ☑ Yes.	Describe See continuation page(s).		\$65.00
8.		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, stamp, coin, or baseball card collections; other collections, memorabilia, o	-	
	☐ No ☑ Yes.	. Describe Art Decor		\$50.00
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, poo canoes and kayaks; carpentry tools; musical instruments	l tables, golf clubs, skis;	
	✓ No ☐ Yes.	. Describe		
10.	Firearm: Example	ses: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No ☐ Yes.	. Describe		
11.	Clothes Example	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	□ No ✓ Yes.	. Describe Clothing 1 Adult and 1 Child		\$200.00
12.	Jewelry Example	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heir gold, silver	loom jewelry, watches, gems,	
	☐ No ☑ Yes.	. Describe Costume Jewelry		\$25.00
13.		m animals es: Dogs, cats, birds, horses		
	✓ No ☐ Yes.	. Describe		
14.	Any oth	er personal and household items you did not already list, including any l list	nealth aids you	
		. Give specific		
15.	Add the	dollar value of all of your entries from Part 3, including any entries for p		*450.00
	attached	d for Part 3. Write the number here		\$450.00

Deb	tor 1	Shonetta Michelle Bethi	une	Case number (if known)	
P	art 4:	Describe Your Finan	ncial Assets		
			able interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your petition	wallet, in your home, in a safe deposit box, a	nd on hand when you file your	
	□ No			Cash:	\$5.00
17.	Deposit	es: Checking, savings, or oth	her financial accounts; certificates of deposit other similar institutions. If you have multiple	;; shares in credit unions,	<u> </u>
	□ No ☑ Yes		Institution name:		
	17.	Checking account:	Checking account - First Convience	Bank (x1736)	\$0.00
18.	Example No	mutual funds, or publicly to es: Bond funds, investment a	accounts with brokerage firms, money marke	et accounts	
19.	an inter No Yes info	blicly traded stock and interest in an LLC, partnership, . Give specific rmation about n Name o	·	businesses, including % of ownership:	
20.	Negotia Non-neg No No Yes info	ble instruments include perso	and other negotiable and non-negotiable is onal checks, cashiers' checks, promissory not be you cannot transfer to someone by signing the same:	otes, and money orders.	
21.	Example No Yes	profit-sharing plans List each ount separately. Type of a			
			similar plan: 401(k) Through employee	r	\$2,479.35
22.	Your sha		ts bu have made so that you may continue servi ds, prepaid rent, public utilities (electric, gas,		
	∀ Yes	Socurity donosit on ro	Institution name or individual:	s.14	*050.00
23.	☑ No		periodic payment of money to you, either for ame and description:		\$250.00

Debt	tor 1 Shonetta Michelle B	Bethune	Case numb	oer (if known)	
24.	Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b)	in an account in a qualified ABLE progra), and 529(b)(1).	am, or under a qual	ified state tuition pro	ogram.
	☑ No				0.7044.)
	_	titution name and description. Separately f			. § 521(c)
25.	Trusts, equitable or future into powers exercisable for your b	erests in property (other than anything li enefit	sted in line 1), and	rights or	
	✓ No☐ Yes. Give specific information about them				
26.		ks, trade secrets, and other intellectual pnes, websites, proceeds from royalties and	•	ts	
	✓ No ☐ Yes. Give specific information about them				
27.		er general intangibles clusive licenses, cooperative association h	oldings, liquor licens	es, professional licen	ses
	✓ No Yes. Give specific information about them				
Mon	ey or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you				
	☑ No				
	Yes. Give specific informat			Federa	l:
	about them, including wheth you already filed the returns			State:	
	and the tax years			Local:	
29.	Family support Examples: Past due or lump su	m alimony, spousal support, child support,	maintenance, divorc	ce settlement, propert	y settlement
	No				•••
	Yes. Give specific informat	ion gan account for Wali Phillips, addres	ss unknown to	Alimony:	\$0.00
	Debtor. Amt: \$150,000.		33 unknown to	Maintenance:	\$0.00
				Support:	\$150,000.00
				Divorce settlement	:\$0.00
				Property settlemen	t: \$0.00
30.	compensation, Soci	s you bility insurance payments, disability benefits al Security benefits; unpaid loans you made		pay, workers'	
	✓ No Yes. Give specific informat	ion			
31.		s life insurance; health savings account (HS	A); credit, homeown	er's, or renter's insura	nce
	No✓ Yes. Name the insurance company of each policy				
	and list its value	Company name:	Beneficiary:	Sı	ırrender or refund value:
		Term life through State Farm	survivors		\$0.00

Deb	Shonetta Michelle Bethune	Case number (if known)	
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurar entitled to receive property because someone has died	ce policy, or are currently	
	✓ No ☐ Yes. Give specific information		
33.	Claims against third parties, whether or not you have filed a lawsuit or r Examples: Accidents, employment disputes, insurance claims, or rights to so		
	✓ No ☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including courights to set off claims	nterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim		
35.	Any financial assets you did not already list		
	✓ No✓ Yes. Give specific information	_	
36.	Add the dollar value of all of your entries from Part 4, including any entrattached for Part 4. Write that number here		\$152,734.35
Pa	art 5: Describe Any Business-Related Property You Own o	r Have an Interest In. List any r	eal estate in Part 1
37.	Do you own or have any legal or equitable interest in any business-relat	ed property?	
	✓ No. Go to Part 6.		
	Yes. Go to line 38.		
		 	Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe	-	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers desks, chairs, electronic devices	, fax machines, rugs, telephones,	
	✓ No ☐ Yes. Describe		
40.	Machinery, fixtures, equipment, supplies you use in business, and tools	of your trade	
	✓ No ☐ Yes. Describe	_	
41.	Inventory		
	✓ No ☐ Yes. Describe		
42.	Interests in partnerships or joint ventures		
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:	

Deb	otor 1 Shonetta Michelle Bethune Case number (if known)	
43.	Customer lists, mailing lists, or other compilations	
	No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe	
44.	Any business-related property you did not already list	
	✓ No ☐ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have If you own or have an interest in farmland, list it in Part 1.	an Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7. ✓ Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish	
	✓ No Yes	
48.	Cropseither growing or harvested	
	✓ No Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	art 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	re
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
	✓ No ✓ Yes. Give specific information.	

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	Shonetta Michelle Bethune	Case nu	umber (if known)	
	ne dollar value of all of your entries from Part 7. Write List the Totals of Each Part of this Form	that number here	→	\$0.00
55. Part 1	: Total real estate, line 2			\$0.00
56. Part 2	: Total vehicles, line 5	\$10,900.00		
57. Part 3	: Total personal and household items, line 15	\$450.00		
58. Part 4	: Total financial assets, line 36	\$152,734.35		
59. Part 5	: Total business-related property, line 45	\$0.00		
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$164,084.35	Copy personal property total	+ \$164,084.35
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$164,084.35

Del	btor 1 Shonetta Michelle Bethune	Case number (if known)
6.	Household goods and furnishings (details):	
	Sofa	\$30.00
	Dining room table and chairs	\$20.00
	Dishes/Flatware	\$5.00
	Pots/Pans/Cookware	\$5.00
	Bed	\$50.00
7.	Electronics (details):	
	2 Televisions	\$50.00
	DVD player	\$5.00
	Video Game system	\$10.00

	formation to i	dentify your	case:			
Debtor 1	Shonetta	Michelle	Bethune			
Debtor 2	First Name	Middle Name	e Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court fo	r the: NORTHE	RN DISTRICT OF	TEX	AS	☐ Check if this is an
Case number (if known)						amended filing
Official Form	1 106C					
Schedule C	: The Prope	erty You Cl	aim as Exemp	pt		04/16
Using the property space is needed, write your name a	y you listed on <i>Sch</i> fill out and attach t nd case number (i	nedule A/B: Properto this page as more fixed this page as more fixed the fix	erty (Official Form 10 any copies of Part 2	6A/B 2: Ad	as your source, list the ditional Page as nece	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages, you claim. One way of doing so
is to state a spec exempted up to t receive certain b exemption of 100	ific dollar amoun he amount of any enefits, and tax-e 0% of fair market	t as exempt. Al applicable stat xempt retirement value under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	claii xemp limite empti	n the full fair market v tionssuch as those d in dollar amount. F	value of the property being for health aids, rights to However, if you claim an ar amount and the value of the
Part 1: Ide	entify the Prop	perty You Cla	im as Exempt			
1. Which set of	f exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
ш	claiming state and claiming federal e		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U	S.C. § 522(b)(3)	
_				mpt. i	ill in the information l	below.
Brief description	of the property a	nd line on	Current value of the portion you	Am	ount of the mption you claim	Specific laws that allow exemption
Schedule A/B tile	it lists tills proper	ity	own	exe	inpuon you ciaiin	
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$10,900.00		\$0.00	11 U.S.C. § 522(d)(2)
2016 Ford Esca	ape (approx. 56,	000 miles)			100% of fair market	
Line from Schedu	le A/B: 3.1				value, up to any applicable statutory	
					limit	
Brief description:			\$30.00		\$30.00	11 U.S.C. § 522(d)(3)
Brief description: Sofa Line from Schedu	le A/B: 6		\$30.00	_ <u>✓</u>		11 U.S.C. § 522(d)(3)

Debtor 1	Shonetta Michelle Bethune		Case number	r (if known)
Part 2:	Additional Page			
	ription of the property and line on 4/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
_	ption: om table and chairs chedule A/B: 6	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descri Dishes/Fla Line from S	•	\$5.00	\$5.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	ption: s/Cookware chedule A/B: 6	\$5.00	\$5.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descri Bed Line from S	ption: Schedule A/B: 6	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descri 2 Televisi Line from S	•	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descri DVD playe Line from S	•	\$5.00	\$5.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
	ption: me system chedule A/B: 7	\$10.00	\$10.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief descri Art Decor Line from S		\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
_	ption: I Adult and 1 Child Cchedule A/B: 11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Debtor 1	Shonetta Michelle Bethune			Case number	(if known)
Part 2:	Additional Page				
	ription of the property and line on A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B		eck only one box for h exemption	
Brief descri	•	\$25.00	\square	\$25.00 100% of fair market	11 U.S.C. § 522(d)(4)
Line from S	Schedule A/B: 12			value, up to any applicable statutory limit	
Brief descri	•	\$5.00	Ø	\$5.00 100% of fair market	11 U.S.C. § 522(d)(5)
Line from S	Schedule A/B: 16			value, up to any applicable statutory limit	
(x1736)	iption: account - First Convience Bank Schedule A/B:17.1	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief descri	iption: rough employeer	\$2,479.35	Ø	\$2,479.35 100% of fair market	11 U.S.C. § 522(d)(12)
	Schedule A/B: 21		ш	value, up to any applicable statutory limit	
Brief descri	iption: deposit on rental unit	\$250.00	Ø	\$250.00 100% of fair market	11 U.S.C. § 522(d)(5)
=	Schedule A/B:22			value, up to any applicable statutory limit	
Brief descri	iption: //ichigan account for Wali Phillips,	\$150,000.00	<u> </u>	\$150,000.00 100% of fair market	11 U.S.C. § 522(d)(10)(D)
address ι	unknown to Debtor Schedule A/B: 29			value, up to any applicable statutory limit	
Brief descri	iption: through State Farm	\$0.00	Ø	\$0.00	11 U.S.C. § 522(d)(7)
	Schedule A/B: 31			100% of fair market value, up to any applicable statutory limit	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Shonetta Michelle Bethune CASE NO

CHAPTER 7

Scheme Selected: Federal

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$10,900.00	\$18,209.46	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$110.00	\$0.00	\$110.00	\$110.00	\$0.00
7.	Electronics	\$65.00	\$0.00	\$65.00	\$65.00	\$0.00
8.	Collectibles of value	\$50.00	\$0.00	\$50.00	\$50.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$200.00	\$0.00	\$200.00	\$200.00	\$0.00
12.	Jewelry	\$25.00	\$0.00	\$25.00	\$25.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$5.00	\$0.00	\$5.00	\$5.00	\$0.00
17.	Deposits of money	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$2,479.35	\$0.00	\$2,479.35	\$2,479.35	\$0.00
22.	Security deposits and prepayments	\$250.00	\$0.00	\$250.00	\$250.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Shonetta Michelle Bethune CASE NO

CHAPTER 7

Scheme Selected: Federal

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
 29.	Family support	\$150,000.00	\$0.00	\$150,000.00	\$150,000.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1 8.	Cropseither growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTALS:	\$164,084.35	\$18,209.46	\$153,184.35	\$153,184.35	\$0.00

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Shonetta Michelle Bethune CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description Market Value Lien **Equity Real Property** (None) **Personal Property** (None) \$0.00 \$0.00 \$0.00 TOTALS: Non-Exempt Property by Item: The following property, or a portion thereof, is non-exempt. Market Value Lien **Equity Property Description** Non-Exempt Amount **Real Property**

(None)

Personal Property

(None)

TOTALS: \$0.00 \$0.00 \$0.00

Summary	
A. Gross Property Value (not including surrendered property)	\$164,084.35
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$164,084.35
D. Gross Amount of Encumbrances (not including surrendered property)	\$18,209.46
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$18,209.46
G. Total Equity (not including surrendered property) / (A-D)	\$153,184.35
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$153,184.35
J. Total Exemptions Claimed (Wild Card Used: \$255.00, Available: \$13,645.00)	\$153,184.35
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

E11 1 - (1.1 - 1 - 6						
Debtor 1	Shonetta	entify your case Michelle	Bethune			
Debior	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for t	he: NORTHERN D	DISTRICT OF TEXAS			
Case number					☐ Check if this is	s an
(if known)					amended filing	
Official Form	106D					
Schedule D:	: Creditors V	Vho Have Cla	aims Secured by	/ Property		12/15
correct information on the top of any 1. Do any credit	on. If more space i additional pages, tors have claims s	is needed, copy the write your name ar ecured by your promit this form to the	ed people are filing togo e Additional Page, fill it and case number (if know operty? court with your other scho	out, number the entri vn).	es, and attach it to thi	s form.
Part 1: Lis	t All Secured C	Claims				
claim, list the creditor has a	creditor separately particular claim, lis sible, list the claims	ditor has more than for each claim. If m t the other creditors in alphabetical orde	ore than one in Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the	e property that claim:	\$18,209.46	\$10,900.00	\$7,309.46
Capital One Aut	o Finance	2016 Ford	Escape			
Attn: Bankruptc Number Street	у					
PO Box 30285		As of the da	te you file, the claim is:	Check all that apply.		
Solt Lake City	IIT 04420	Continge		,		
Salt Lake City City	State ZIP Code	Disputed				
Who owes the del ☐ Debtor 1 only	ot? Check one.		en. Check all that apply.			
Debtor 2 only			ement you made (such as / lien (such as tax lien, m		car loan)	
☐ Debtor 1 and ☐ At least one of	Debtor 2 only the debtors and an	Judgmer Judgmer	nt lien from a lawsuit	,		
☐ Check if this o	claim relates	V Outer (iii	cluding a right to offset) ate of Title			
to a communi Date debt was inc	•	Last 4 digits	s of account number	1 0 0 1		
Pay direct						
Add the dollar val that number here:	-	in Column A on thi	s page. Write	\$18,209.46		
If this is the last p	age of your form,	add the dollar value	e totals from		1	

Official Form 106D

all pages. Write that number here:

Debtor 1 Shonetta Michelle Bethune Prix Name Mode Name Last Name					•		
Pist Name Middle Name Last Name Debtor 2 Gipouse, if filing) First Name Middle Name Last Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS	Fill in this inf	ormation to id	dentify your c	case:			
Debtor 2 (Spouse, if filing) First Name	Debtor 1						
Check if this is a number (if known) Check if this is an amended filing		First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS Case number (If known) Check if this is an amended filing		E: (N					
Case number (if known) Check if this is an amended filing	(Spouse, if filing)	First Name	Middle Name	Last Name			
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or Schedule Also. Property (Official Form 106Als) and on Schedule Also. Property (Official Form 106Als) and on Schedule Science of Control of Control of Schedule Science of Control of Control of Schedule Science of Control of Control of Control of Schedule Science of Control of Con	United States Ba	nkruptcy Court for	the: NORTHE	RN DISTRICT OF TEXAS			
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule B: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property in force space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1:	Case number				_	Chack if this is a	an.
Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106D). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1	(if known)				_		111
Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106D). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1	Official Form	106E/E			_		
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Als: Property (Official Form 106A)B and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and propriority and propriority amounts, list that claim here and show both priority and propriority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim			- VA/I 11				40/45
claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AlB: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106A/B). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes.	Schedule E/	F: Creditor	s Who Hav	e Unsecured Claims			12/15
No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority amounts, list that claim here and show both priority and onopriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority amount Nonpriority amount 2.1 Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operations Number Street PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset?	Do not include an If more space is n to this page. On t	y creditors with needed, copy the the top of any ad	partially secured Part you need, f ditional pages, v	d claims that are listed in Schedule fill it out, number the entries in the write your name and case number (D: Creditors Who Hoboxes on the left. At	old Claims Secur	ed by Property.
Z. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority amount 2.1 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.	1. Do any credit	tors have priority	unsecured clai	ms against you?			
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority amount Nonpriority amount \$0.00 \$0.00 Nonpriority amount Nonpriority amount Priority amount Nonpriority amount Nonpriorit	☐ No. Go t	to Part 2.					
claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet. Total claim Priority amount Nonpriority amount Priority amount Square Priority Creditor's Name Last 4 digits of account number Centralized Insolvency Operations Number Street PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Philadelphia PA 19101-7346 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?	✓ Yes.						
Total claim Priority amount Nonpriority amount	claim. For ea show both pric more space is	ch claim listed, identity and nonpriories needed for priori	entify what type o ty amounts. As r ty unsecured clai	of claim it is. If a claim has both prior much as possible, list the claims in al	ity and nonpriority amo	ounts, list that clair rding to the credito	n here and or's name. If
So.00 \$0.00 \$0.00 Internal Revenue Service Friority Creditor's Name Centralized Insolvency Operations When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	(For an explar	nation of each typ	e of claim, see th	e instructions for this form in the inst			
\$0.00 \$0.00 \$0.00 Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operations Number Street PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No \$0.00 \$0.0					Total claim	_	•
Internal Revenue Service Priority Creditor's Name Centralized Insolvency Operations Number Street PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only At least one of the debtors and another Claims for a community debt Is the claim subject to offset? When was the debt incurred? When was the debt incurred? When was the debt incurred? Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify	2.1				**		
Cast 4 digits of account number		o Comico			\$0.00	\$0.00	\$0.00
Number Street PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify				- Last 4 digits of account number			
Philadelphia PA 19101-7346 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No		olvency Operat	ions	When was the debt incurred?		_	
Philadelphia PA 19101-7346 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No				- As of the date you file, the claim	is: Check all that app	ly.	
Disputed				Contingent	• •	,	
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No				—			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	•			— .			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No		debt? Check C	nie.	• •	aim:		
At least one of the debtors and another intoxicated Check if this claim is for a community debt Is the claim subject to offset? No No				₩ -	you owe the governme	ent	
Check if this claim is for a community debt Specify Sthe claim subject to offset? No No No	느	•	another	—	njury while you were		
Is the claim subject to offset? ☑ No							
	<u> </u>		-	_ , ,			
	브 v						

Debtor 1	Shonetta M	ichelle	Bethune	Ca	se number (if knowr	n)	
Part 1:	Your PRI	ORITY	Unsecured C	laims Continuation Page			
After listing previous pa	-	n this p	age, number the	n sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2					\$83.00	\$83.00	\$0.00
State of Mi	ichigan Dept or's Name	. of Tre	eas.	- Last 4 digits of account number			
	Street			_ When was the debt incurred? _		_	
				As of the date you file, the claim is	: Check all that app	oly.	
Lansing City		MI State	48909-8274 ZIP Code	Contingent Unliquidated Disputed			
Who incurre	ed the debt?	Check	one.	Type of PRIORITY unsecured clain	n:		
At least Check i	2 only I and Debtor 2 one of the deb	tors and for a co	another mmunity debt	 □ Domestic support obligations □ Taxes and certain other debts you □ Claims for death or personal injuintoxicated □ Other. Specify 	•	ent	

Debtor 1 Shonetta M	lichelle Bethune	Case number (if known)	
Part 2: List All o	f Your NONPRIORITY	Unsecured Claims	
-	ve nonpriority unsecured conting to report in this part.	Claims against you? Submit this form to the court with your other schedules.	
If a creditor has more type of claim it is. Do	than one nonpriority unsecu not list claims already include	n the alphabetical order of the creditor who holds each claim. ured claim, list the creditor separately for each claim. For each claim listed, ided in Part 1. If more than one creditor holds a particular claim, list the other issecured claims, fill out the Continuation Page of Part 2.	•
			Total claim
Aes/esa Nonpriority Creditor's Name Pob 61047 Number Street		Last 4 digits of account number 0 0 1 0 1 0 When was the debt incurred? 11/2004 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$5,936.00
Harrisburg City Who incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim is Is the claim subject to off No Yes	otors and another for a community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Aes/esa Nonpriority Creditor's Name Pob 61047 Number Street Harrisburg City Who incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim is Is the claim subject to off No Yes	otors and another for a community debt	Last 4 digits of account number	\$5,935.00

Debtor 1	Shonetta Michelle Bethune	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous pa	g any entries on this page, number the age.	m sequentially from the	Total claim
4.3			\$5,935.00
Aes/esa		Last 4 digits of account number 0 0 1 1	
Nonpriority Cre		When was the debt incurred? 08/2005	
Pob 61047 Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ ☐ Contingent	
		Unliquidated	
Harrisburg	PA 17106	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	ed the debt? Check one.	✓ Student loans	
Debtor 1		Obligations arising out of a separation agreement or divorce	
Debtor 2	2 only 1 and Debtor 2 only	that you did not report as priority claims	
	one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	if this claim is for a community debt	Other. Specify	
<u> </u>	subject to offset?		
✓ No			
Yes			
4.4			\$4,818.00
Aes/esa Nonpriority Cre	oditor's Name	Last 4 digits of account number0005_	
Pob 61047		When was the debt incurred? 07/2005	
Number S	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ ☐ Disputed	
Harrisburg			
City Who incurre	State ZIP Code ed the debt? Check one.	Type of NONPRIORITY unsecured claim:	
□ Debtor 1		☑ Student loans	
Debtor 2	,	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
ш	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
لكا	one of the debtors and another	Other. Specify	
	if this claim is for a community debt	_	
	subject to offset?		
✓ No			
Yes			
4.5			\$3.957.00
Aes/esa		Last 4 digits of account number 0 0 0 8	-
Nonpriority Cre		When was the debt incurred? 10/2003	
Pob 61047	Street	As of the date you file, the claim is: Check all that apply.	
Number	Oueet	_ ☐ Contingent	
		Unliquidated	
Harrisburg	PA 17106	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	ed the debt? Check one.	Student loans	
Debtor 1		Obligations arising out of a separation agreement or divorce	
Debtor 2	2 only 1 and Debtor 2 only	that you did not report as priority claims	
	one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	if this claim is for a community debt	Other. Specify	
	subject to offset?		
✓ No			
Yes			

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$3,614.00
Aes/esa	Last 4 digits of account number 0 0 1	
Nonpriority Creditor's Name	When was the debt incurred? 10/2002	
Pob 61047 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
Harrisburg PA 17106 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No ☐ Yes		
Yes		
4.7		\$3,614.00
Aes/esa	Last 4 digits of account number 0 0 0 4	Ψο,σ14.σσ
Nonpriority Creditor's Name	When was the debt incurred? 10/2004	
Pob 61047		
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent ☐ Unliquidated	
	— ☐ Disputed	
Harrisburg PA 17106		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		
4.8		* 0.400.00
	Look 4 digita of account number 0 0 0 0	\$2,409.00
Aes/esa Nonpriority Creditor's Name	Last 4 digits of account number 0 0 0 2	
Pob 61047	When was the debt incurred? 10/2003	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Disputed	
Harrisburg PA 17106		
City State ZIP Code Who incurred the debt? Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	✓ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	LI Salei. Opcolly	
Is the claim subject to offset?		
No		
☐ Yes		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unse	cured Claims Continuation Page	
After listing any entries on this page, number to previous page.	them sequentially from the	Total claim
4.9		\$1,978.00
Aes/esa	Last 4 digits of account number 0 0 0 9	
Nonpriority Creditor's Name	When was the debt incurred? 07/2004	
Pob 61047 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Harrisburg PA 17106		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debi	Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
440		
4.10		\$1,978.00
Aes/esa Nonpriority Creditor's Name	Last 4 digits of account number <u>0 0 1 2</u>	
Pob 61047	When was the debt incurred? 05/2006	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	☐ Disputed	
Harrisburg PA 17106		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☑ Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community deb	t -	
Is the claim subject to offset?		
No You		
Yes		
4.11		\$1,605.00
Aes/esa	Last 4 digits of account number 0 0 0 6	
Nonpriority Creditor's Name	When was the debt incurred? 04/2006	
Pob 61047 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
No		
Yes		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.12		\$1,204.00
Aes/esa	Last 4 digits of account number 0 0 0 3	
Nonpriority Creditor's Name	When was the debt incurred? 07/2004	
Pob 61047 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
Harrisburg PA 17106 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
 		
Is the claim subject to offset? ✓ No		
☐ Yes		
4.13		\$5,936.00
Capital One	Last 4 digits of account number 1 9 2 7	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 12/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 30285	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	✓ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.14		\$3,017.00
Capital One	Last 4 digits of account number 7 6 3 4	
Nonpriority Creditor's Name	When was the debt incurred? 11/2014	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 30285	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
✓ No		
☐ Yes		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$539.40
Chase Receivables	Last 4 digits of account number 8 1 8 9	·
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 659 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
West Caldwell NJ 07007-0659	Disputed	
West Caldwell NJ 07007-0659 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Collecting for-Medac Anesth.	
Is the claim subject to offset? ✓ No		
☐ Yes		
4.16		\$0.00
Children's Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
1600 7th Avenue South Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Birmingham AL 35233	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical Bills	
Is the claim subject to offset?	Medical Bills	
No No		
Yes		
4.17		\$0.00
Comcast	Last 4 digits of account number	
Nonpriority Creditor's Name 3301 W. Royal Lane	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Irving TX 75015	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Utilities	
Is the claim subject to offset?		
☑ No		
☐ Yes		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$1,898.00
Comenitycapital/Big Lot	Last 4 digits of account number 4 0 9 0	
Nonpriority Creditor's Name Attn: Bankruptcy Dept	When was the debt incurred? 04/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182125	□ Contingent □ Unliquidated	
	— ☐ Disputed	
Columbus OH 43218 City State ZIP Code	Type of NONDRIODITY ungequired eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.19		\$1,708.00
Credit One Bank	Last 4 digits of account number 7 0 6 1	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 12/2014	
ATTN: Bankruptcy Department Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 98873	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Las Vegas NV 89193		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Gredit Gard	
▼ No		
Yes		
4.20		\$1,651.00
Credit One Bank	Last 4 digits of account number 2 9 7 3	
Nonpriority Creditor's Name ATTN: Bankruptcy Department	When was the debt incurred? 12/2015	
Number Street PO Box 98873	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Las Vegas NV 89193	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$304.07
FBCS, Inc.	Last 4 digits of account number 8 5 9 8	
Nonpriority Creditor's Name	When was the debt incurred?	
330 S. Warminster Road Suite 353 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ Contingent	
	Unliquidated	
Hothere DA 40040	Disputed	
Hatboro PA 19040 City State ZIP Code	Type of NONDDIODITY unccoured claims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another		
☑ Check if this claim is for a community debt	Collecting for - ComCast Cable	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.22		¢4 740 20
	Leat 4 divite of account number 0 7 4 0	\$1,719.20
LVNV Funding Nonpriority Creditor's Name	Last 4 digits of account number 3 7 1 6	
Po Box 10584	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Greenville SC 29603		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -Credit One Bank	
Is the claim subject to offset?		
☑ No		
Yes		
4.23		\$0.00
McKinney Hospital	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 4115 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Anchorage AK 99524	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Medical Bills	
Is the claim subject to offset?		
☑ No □ Yes		
, ,		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.24		\$0.00
Orthopaedic Specialists of Dallas	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
1005 W, Ralph Hall Parkway, Suite 227 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Rockwall TX 75032	─ ☐ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Bills	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.25		\$0.00
Progressive Finance	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
11629 South 700 E, Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Draper UT 84020	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Purchase Money	
Is the claim subject to offset?		
☑ No □ Yes		
4.26		\$151.13
Roseville Community Schools	Last 4 digits of account number 1 3 9 6	
Nonpriority Creditor's Name	When was the debt incurred? 9/8/2017	
Number Street Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Roseville MI 48066	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
	Services	
Is the claim subject to offset?		
☑ No □ Yes		
1 1 100		

Debtor 1 Shonetta Michelle Bethune	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	nem sequentially from the	Total claim
4.27		\$957.00
Synchrony Bank/Walmart	Last 4 digits of account number 4 7 2 5	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 12/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 965060	Contingent	
	☐ Unliquidated ☐ Disputed	
Orlando FL 32896		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations griding out of a congretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
☑ No □ Yes		
4.28		\$5,305.00
US Bank/RMS CC	Last 4 digits of account number 3 2 4 7	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 04/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 5229	Contingent	
	Unliquidated Disputed	
Cincinnati OH 45201	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
${\color{red} \overline{\hspace{-1em}\!$	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1	Shonetta Michelle	Bethune	Case number (if known)			
Part 3:	List Others to B	e Notified Ab	out a Debt That You Already Listed			
For ex credito debts	ample, if a collection a or in Parts 1 or 2, then	gency is trying list the collectio 1 or 2, list the a	otified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. to collect from you for a debt you owe to someone else, list the original n agency here. Similarly, if you have more than one creditor for any of the dditional creditors here. If you do not have additional parties to be notified for bmit this page.			
Allied Inte	rstate LLC		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name P.O. Box 3	261445		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims			
	Street		Collecting for - LVNV/Credit One Part 2: Creditors with Nonpriority Unsecured Claims			
			Last 4 digits of account number 9 0 0 4			
Columbus City	State	43236 ZIP Code	<u> </u>			
Name 3rd Floor,	ates Attorney - NORT 1100 Commerce St. Street	TH .	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Dallas City	TX State	75242 ZIP Code	Last 4 digits of account number			
Name US Depart Number	ey General tment of Justice Street sylvania Ave, NW		On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Washingto City	on DC State	20530 ZIP Code	Last 4 digits of account number			

Debtor 1	Shonetta Michelle Bethune	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom runt r	6b.	Taxes and certain other debts you owe the government	6b.	\$83.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$83.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$51,936.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	\$14,232.80
	6j.	Total. Add lines 6f through 6i.	6j.	\$66,168.80

Fill in this	s information to i	dentify your case	:	
Debtor 1	Shonetta First Name	Michelle Middle Name	Bethune	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if t	filing) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court fo	r the: NORTHERN D	DISTRICT OF TEXA	<u>18</u>
Case number (if known)	er			☐ Check if this is an
(II KIIOWII)				amended filing
Official F	orm 106G			
	e G: Executory	, Contracte an	d Unavaired I	02505
No. Yes List sep is for (fo	s. Fill in all of the informarately each person or example, rent, vehicle	le this form with the co mation below even if the or company with who cle lease, cell phone)	ourt with your other so ne contracts or leases om you have the con	hedules. You have nothing else to report on this form. s are listed on Schedule A/B: Property (Official Form 106A/E tract or lease. Then state what each contract or lease s for this form in the instruction booklet for more examples or
executor	y contracts and unexp	ired leases.		
Pers	on or company with v	vhom you have the c	ontract or lease	State what the contract or lease is for
	ter's Hill Apartment	s		_ Residential Lease
Name 1808	31 Midway Rd			Contract to be REJECTED
Numb	er Street			
			75007	_
Dalla	as	TX	75287	

Fill	in this ir	nformation to i	dentify your case:		
Debto		Shonetta	Michelle	Bethune	
		First Name	Middle Name	Last Name	
Debto (Spou		g) First Name	Middle Name	Last Name	
Unite	d States B	ankruptcy Court for	the: NORTHERN D	STRICT OF TEXAS	
	number	,,			Charlet Miles in an
(if kn	own)				☐ Check if this is an amended filing
		n 106H			
Sche	edule F	l: Your Code	ebtors		12
page. 1. D	On the to	_	l Pages, write your na	ame and case number (i	xes on the left. Attach the Additional Page to this (if known). Answer every question. er spouse as a codebtor.)
<u> </u>	_				
					rerritory? (Community property states and territories ico, Texas, Washington, and Wisconsin.)
	_	to line 3.			
V	7] Yes. D □ No	•	mer spouse, or legal ed	quivalent live with you at	it the time?
	☑ Ye				
	In	which community s	tate or territory did you	live? Texas	Fill in the name and current address of that person.
		ean Bethune ame of your spouse, for	mer spouse, or legal equiv	alent	
	Nu	ımber Street			
	_				
	Cit	ty	St	ate ZIP Code	
pe cr	erson sho reditor on	wn in line 2 again Schedule D (Offic	as a codebtor only if	that person is a guaran dule E/F (Official Form	codebtor if your spouse is filing with you. List the intor or cosigner. Make sure you have listed the in 106E/F), or <i>Schedule G</i> (Official Form 106G). Use
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the deb
					Check all schedules that apply:
3.1	Bethun	e, Sean			— Schedule D, line
	Name 18081 N	/lidway Rd #111			<u> </u>
	Number	Street			<u> </u>
	Dallas		TV	75297	Schedule G, line Aes/esa
	Dallas City		TX State	75287	

Debtor	Shonetta Michelle Bethune)		Case number (if known)
	Additional Page to List	More Code	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.2	Bethune, Sean			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.2
				Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
3.3	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.3
				Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
3.4	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.4
				Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
3.5	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.5
				Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
3.6	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.6
	- Outcot			Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
3.7	Bethune, Sean			Schedule D, line
	18081 Midway Rd #111			
	Number Street			Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	7IP Code	

Debtor 1	Shonetta Michelle Bethune			Case number (if known)
	Additional Page to List	More Code	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Aes/esa
	•	State	ZIP Code	
	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.9
				Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111			
	Number Street			Schedule G, line
	Dallas	TX	75287	Aes/esa
	City	State	ZIP Code	
	Bethune, Sean			Schedule D, line
	Name 18081 Midway Rd #111			
	Number Street			-
	Dellas	TV	75207	Schedule G, line Aes/esa
	Dallas City	TX State	75287 ZIP Code	
3.12	Bethune, Sean			Cabadula D. lina
	Name 18081 Midway Rd #111			Schedule D, line
	Number Street			Schedule E/F, line 4.12
				Schedule G, line Aes/esa
	Dallas City	TX State	75287 ZIP Code	
3.13	Bethune, Sean			
	Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 5.1
				Schedule G, line
	Dallas	TX State	75287	Allied Interstate LLC

Debtor 1	Shonetta Michelle Bethune	е		Case number (if known)
	Additional Page to List	t More Code	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.14	Bethune, Sean			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Capital One
	•	State	Zii Gode	
3.15	Bethune, Sean Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.14
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Capital One
3.16	Bethune, Sean			
3.10	Name			Scriedule D, lille 2.1
	18081 Midway Rd #111 Number Street			Schedule E/F, line
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Capital One Auto Finance
3.17	Bethune, Sean			
3.17	Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.15
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Chase Receivables
0.40	Bethune, Sean			
3.18	Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line <u>4.16</u>
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Children's Hospital
0.40	Bethune, Sean	_ 1010	2240	
3.19	Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.17
				Schedule G, line
	Dallas City	TX State	75287	Comcast

Debtor	Shonetta Michelle Bethui	ne		Case number (if known)
	Additional Page to Lis	st More Cod	ebtors	
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.20	Bethune, Sean			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.18
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Comenitycapital/Big Lot
3.21	Bethune, Sean			
3.21	Name 18081 Midway Rd #111			Schedule D, line
	Number Street			Schedule E/F, line 4.19
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Credit One Bank
3.22	Bethune, Sean			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.20
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Credit One Bank
	•	Oldic	Zii Gode	
3.23	Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.21
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	FBCS, Inc.
3.24	Bethune, Sean			
3.24	Name			Schedule D, line
	18081 Midway Rd #111 Number Street			Schedule E/F, line 2.1
				Schedule G, line
	Dallas City	TX State	75287 ZIP Code	Internal Revenue Service
3.25	Bethune, Sean			Schedule D, line
	Name 18081 Midway Rd #111			
	Number Street			Schedule E/F, line 4.22 Schedule G, line
	Dallas	TX	75287	LVNV Funding
	City	State	7IP Code	

Debtor 1 Shonetta Mi	chelle Bethune		Case number (if known)
Additiona	I Page to List More Code	ebtors	
Column 1: Your co	odebtor		Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3.26 Bethune, Sean			Schedule D, line
18081 Midway R	d #111		Schedule E/F, line 4.23
- Street			Schedule G, line
Dallas	TX	75287	McKinney Hospital
City	State	ZIP Code	
3.27 Bethune, Sean Name			Schedule D, line
18081 Midway R Number Street	d #111		Schedule E/F, line 4.24
			Schedule G, line
<u>Dallas</u> City	TX State	75287 ZIP Code	Orthopaedic Specialists of Dallas
3.28 Bethune, Sean			
Name 18081 Midway R			Scriedule D, line
Number Street	u #111		Schedule E/F, line 4.25
			Schedule G, line
Dallas City	TX State	75287 ZIP Code	Progressive Finance
3.29 Bethune, Sean			Schodulo D. lino
Name 18081 Midway R	d #111		Schedule D, line
Number Street	<u>u #111</u>		Schedule E/F, line 4.26
			Schedule G, line Roseville Community Schools
Dallas City	TX State	75287 ZIP Code	Rosevine Community Schools
3.30 Bethune, Sean			Schedule D, line
18081 Midway R	d #111		Schedule E/F, line 2.2
Number Street			Schedule G, line
Dallas	TX	75287	State of Michigan Dept. of Treas.
City	State	ZIP Code	
3.31 Bethune, Sean			Schedule D, line
18081 Midway R	d #111		Schedule E/F, line 4.27
Number Street			Schedule G, line
Dallas	TX	75287	Synchrony Bank/Walmart
City	State	ZIP Code	

Debtor 1 Shonetta Michelle Bethune			Case number (if known)			
	Additional Page to Li	st More Code	ebtors			
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt		
				Check all schedules that apply:		
3.32	Bethune, Sean Name 18081 Midway Rd #111			Schedule D, line		
	Number Street			Schedule E/F, line 5.2		
				Schedule G, line		
	Dallas City	TX State	75287 ZIP Code	United States Attorney - NORTH		
3.33	Bethune, Sean Name			Schedule D, line		
	18081 Midway Rd #111 Number Street			Schedule E/F, line 5.3		
	- Street			Schedule G, line		
	Dallas	TX	75287	US Attorney General		
	City	State	ZIP Code			
3.34	Bethune, Sean			Schedule D, line		
	18081 Midway Rd #111 Number Street			Schedule E/F, line 4.28		
				Schedule G, line		
	Dallas	TX	75287	US Bank/RMS CC		
	City	State	ZIP Code			

Debtor 1	Shonetta	Michelle	Bethune		
	First Name	Middle Name	Last Name	Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_ _	An amended filing
United States Bank	ruptcy Court for the	: NORTHERN DI	STRICT OF TEXAS	□	A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)	-				MM / DD / YYYY
Official Form 10	061				
Schedule I: Yo	ur Income				12/15

your name and case number (if known). Answer every question.

Part 1: **Describe Employment** Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job, attach a separate page **Employment status** ✓ Employed Employed with information about ■ Not employed ✓ Not employed additional employers. Occupation Legal Assistant Include part-time, seasonal, or self-employed work. **Orlans PC** Employer's name Occupation may include 1650 West Big Beaver Rd **Employer's address** student or homemaker, if it Number Street Number Street applies. MΙ 48084 Troy City State Zip Code City State Zip Code How long employed there? April 2017

Part 2: **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Deptor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$4,072.94	\$0.00
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$4,072.94	\$0.00

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1 Shonetta Michelle Bethune		Case num	nber (if kno	wn)		_
			For Debtor 1	For Deb	tor 2 or ig spouse)	
	Copy line 4 here	4.	\$4,072.94		\$0.00	_	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$466.88		\$0.00		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. Voluntary contributions for retirement plans	5c.	<u>\$203.65</u>		\$0.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. Insurance	5e.	<u>\$188.50</u>		\$0.00		
	5f. Domestic support obligations	5f.	\$0.00		\$0.00		
	5g. Union dues	5g.	\$0.00		\$0.00		
	5h. Other deductions. Specify: Supp. Life	5h. -	+ <u>\$22.10</u>		\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$881.13		\$0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,191.81		\$0.00		
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00		\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00		\$0.00		
	8e. Social Security	8e.	\$0.00		\$0.00		
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00		\$0.00		
	8g. Pension or retirement income	_ 8g.	\$0.00		\$0.00		
	8h. Other monthly income. Specify:	8h. -	÷ \$0.00		\$0.00		
		_				l	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00		\$0.00	 r	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		+	\$0.00	=	\$3,191.81
	State all other regular contributions to the expenses that you list in Sinclude contributions from an unmarried partner, members of your house friends or relatives.	Schedi hold, y	ule J. our dependents, you	r roommate	es, and ot	ner	
	Do not include any amounts already included in lines 2-10 or amounts th	at are ı	not available to pay e	xpenses li	sted in Sc	hed	ule J.
	Specify:				11.	+	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie				12.		\$3,191.81
	if it applies.			,			Combined monthly income
13.	Do you expect an increase or decrease within the year after you file	tnis fo	rm?				
	✓ No. None. Yes. Explain:						

G	ill in this inform	ation to identi	fy your case:			Chas	uk if thin i		
	Debtor 1	Shonetta First Name	Michelle Middle Name	Beth u Last Na				nded filing ment showing	postpetition
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ıme	—		13 expenses as	
	United States Bankr	uptcy Court for the	: NORTHERN DI	STRICT O	F TEXAS		MM / DD	1/ ۷۷۷۷	_
	Case number							77 1111	
Ĺ	(if known)]			
_	fficial Form 10								
	chedule J: Yo			eople are fil	ing together, both ar	e equa	illy resp	onsible for sup	12/15 oplying
	rrect information. If me and case number	•	•		his form. On the top	of any	/ additio	nal pages, wri	te your
		,		•					
	Part 1: Descri	be Your House	ehold						
1.	Is this a joint case	9?							
	_ No	ebtor 2 live in a s	eparate household?		n for Congrete Househ	and of	Dobtor 2		
2.	☐ Yes Do you have depe		ie Oπiciai Form 1065 No	-z, Expense	s for Separate Housel	1010 01	Deptor 2	•	
	Do not list Debtor		Yes. Fill out this infor each dependent		Dependent's relation			Dependent's age	Does dependent live with you?
	Debtor 2.				Daughter			7	□ No · ☑ Yes
	Do not state the de names.	ependents'							□ No
									Yes No
									Yes
									□ No □ Yes
									☐ No
									Yes
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						
	Part 2: Estima	ite Your Ongo	ing Monthly Exp	enses					
					re using this form as	s a sup	plement	in a Chapter 1	I3 case
	report expenses as form and fill in the		bankruptcy is filed	. If this is a	supplemental Sche	dule J,	check ti	ne box at the to	op of
	clude expenses paid ch assistance and h		-	-				Your expens	es
4.			enses for your resid				4.		\$1,260.00
	If not included in	line 4:							
	4a. Real estate ta	ixes					48	a	
	4b. Property, hom	neowner's, or rente	r's insurance				41	D	\$15.00
	4c. Home mainte	nance, repair, and	upkeep expenses				40	S	
	4d. Homeowner's	association or cor	ndominium dues				40	d.	

Deb	Shonetta Michelle Bethune	Case number (if known)	
		Your expense	es
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$160.00
	6b. Water, sewer, garbage collection	6b	\$35.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$200.00
	6d. Other. Specify: Cell Phone	6d.	\$66.00
7.	Food and housekeeping supplies	7.	\$550.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$45.00
10.	Personal care products and services	10.	\$50.00
11.	Medical and dental expenses	11.	\$15.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$160.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$20.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.	4-	***
	15a. Life insurance	15a	\$30.00
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$81.00
46	15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	15d	
10.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 Ford	17a	\$500.00
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

Deb	tor 1	Shonetta Michelle Bethune	Case number (if known)
		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Othe	r. Specify:	21. +	
22.	Calcu	ulate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$3,187.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2. 22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,187.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,191.81
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$3,187.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$4.81
24.	Do y	ou expect an increase or decrease in your expenses within the year after	you file this form?	
		xample, do you expect to finish paying for your car loan within the year or do y ent to increase or decrease because of a modification to the terms of your mo	. ,	
	 ✓	No		
		Yes. Explain here: None.		

Debtor 1	Shonetta	Michelle	Bethune		
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nove	L act Name		
Spouse, if filing)	First Name	Middle Name	Last Name		
Inited States Bar	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF TEXAS		
Case number				☐ Check if	f this is an
f known)				amende	
fficial Form	106Sum				
ummary of	Your Asse	ets and Liabilit	ies and Certain Stati	istical Information	12/
nedules after yo		nal forms, you must t	then complete the information fill out a new Summary and che		
					Your assets
Schedule A/R	: Property (Officia	al Form 106A/R)			Value of what you ow
		,	/D		\$0.0
Ta. Copy line	e 55, Total real es	state, from Schedule A	/B		
1b. Copy line	e 62, Total persor	nal property, from Sche	edule A/B		\$164,084.3
.,		, , ,			
1c. Copy line	e 63, Total of all p	roperty on Schedule A	/B		\$164,084.3
Part 2: Su	mmarize You	r Liabilities			
					Your liabilities Amount you owe
			Property (Official Form 106D) f claim, at the bottom of the last	page of Part 1 of Schedule D	\$18,209.4
			s (Official Form 106E/F)		***
3a. Copy the	total claims from	Part 1 (priority unsecu	ured claims) from line 6e of Sche	edule E/F	\$83.0
3b. Copy the	total claims from	Part 2 (nonpriority uns	secured claims) from line 6j of So	chedule E/F	+ \$66,168.8
				Your total liabilities	\$84,461.2
		w Income and Even	nenses		
Part 3: Sur	mmarize You	r income and exo			
Schedule I: Yo	mmarize You	ial Form 106I)			
Schedule I: Yo	our Income (Offic	ial Form 106I)	Schedule I		\$3,191.8

Copy your monthly expenses from line 22c of Schedule J.....

\$3,187.00

Debtor 1		Shonetta Michelle Bethune	Case number (if known)				
P	art 4:	Answer These Questions for Administrative and Statis	stical Records				
6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?					
	ш.	No. You have nothing to report on this part of the form. Check this box and Yes	submit this form to the court with yo	our other schedules.			
7.	What	kind of debt do you have?					
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.						
		Your debts are not primarily consumer debts. You have nothing to report it is form to the court with your other schedules.	t on this part of the form. Check this	s box and submit			
8.		the Statement of Your Current Monthly Income: Copy your total current al Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 1	•	\$3,609.05			
9.	Сору	the following special categories of claims from Part 4, line 6 of Sched	ule E/F:				
			Total claim				
	From	Part 4 on Schedule E/F, copy the following:					
	9a. I	Domestic support obligations. (Copy line 6a.)	\$0.0	0			

9d. Student loans. (Copy line 6f.)

\$0.00

\$83.00

\$0.00

\$51,936.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$0.00

9g. Total. Add lines 9a through 9f.

\$52,019.00

				_		
Fill in this inf	ormation to ic	lentify your case	:			
Debtor 1	Shonetta First Name	Michelle Middle Name	Bethune Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for	the: NORTHERN D	ISTRICT OF TEXAS			
Case number (if known)					Check if this is an amended filing	
Official Form	106Dec					
Declaration	About an Ir	ndividual Debt	or's Schedules			12/15
concealing prope \$250,000, or impr	rty, or obtaining	money or property by	chedules or amended schedu y fraud in connection with a b 18 U.S.C. §§ 152, 1341, 1519,	oankruptcy case can re		
Did you pay	or agree to pay s	omeone who is NOT	an attorney to help you fill ou	ıt bankruptcy forms?		
☑ No						
Yes. N	ame of person			<u> </u>	otcy Petition Preparer's Notic d Signature (Official Form 1	
Under penalt true and corr		clare that I have read	the summary and schedules	filed with this declara	ition and that they are	
X /s/ Shone	etta Michelle Be	thune	X			

Signature of Debtor 2

MM / DD / YYYY

Date

Shonetta Michelle Bethune, Debtor 1

MM / DD / YYYY

Date 04/07/2019

Debtor 1	nformation to i	Michelle	Bethune		
Deptor i	First Name	Middle Name			
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court fo	r the: NORTHE	RN DISTRICT OF T	EXAS	
Case number				_	
(if known)				<u> </u>	heck if this is an nended filing
Official Forr	m 107				
Statement	of Financial	Affairs for	Individuals F	iling for Bankruptcy	04/16
Part 1: G 1. What is you Married Not man 2. During the	ur current marital s rried last 3 years, have st all of the places	out Your Mari status? you lived anywh	tal Status and W	there You Lived Before e you live now? clude where you live now. Debtor 2:	Dates Debtor 2 lived there ☐ Same as Debtor 2
				—	ь
9944 W Number	/alnut Hill Street		From 2015	Number Street	From
			To 2017 -	–	To
Dallas City	T)		-	City State ZIP Co	ode
Debtor 1	1:		Dates Debtor 1	Debtor 2:	Dates Debtor 2
			lived there	Como ao Dobtor 1	lived there
				Same as Debtor 1	Same as Debtor 2
	Concord Crt		From 2017		From
Number	Street		To 2018	Number Street	То
Rosevi	lle M	48066	-		

City

State ZIP Code

City

State ZIP Code

	Shonetta Michelle Bethund	9	Case nui	mber (if known)	
	Debtor 1:	Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
			☐ Same as Debte	or 1	☐ Same as Debtor 1
	18081 Midway Rd #2723	From 2018			From
	Number Street	To 2019	Number Street		To
	Dallas TX 752	87			
	City State ZIP C	Code	City	State ZIP Code	
	□ No ☑ Yes. Make sure you fill out <i>Schedu</i>	·	Form 106H).		
	Fill in the total amount of income you re If you are filing a joint case and you hav				
	No ✓ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions
		Sources of income	(before deductions	Sources of income	(before deductions
	Yes. Fill in the details. January 1 of the current year until	Sources of income Check all that apply. Wages, commissions,	(before deductions and exclusions	Sources of income Check all that apply. Wages, commissions,	(before deductions
the d	Yes. Fill in the details. January 1 of the current year until	Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions,	(before deductions and exclusions	Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions,	(before deductions
the d	Yes. Fill in the details. January 1 of the current year until ate you filed for bankruptcy:	Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business	(before deductions and exclusions \$5,639.47	Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business	(before deductions
For the	Yes. Fill in the details. January 1 of the current year until ate you filed for bankruptcy: the last calendar year: lary 1 to December 31, 2018	Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips	(before deductions and exclusions \$5,639.47	Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips	(before deductions

Debtor 1		Shonetta	Michelle Be	thune		Case number (if known)			
 	Include income regardless of whether that income unemployment; and other public benefit payments		year or the two previous calendar years? e is taxable. Examples of other income are alimony; child support; Social Security; s; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; a joint case and you have income that you received together, list it only once under						
ı	List each	source and	d the gross in	come from eacl	n source separat	ely. Do not include	income that you lis	ted in line 4.	
	☑ No □ Yes.	Fill in the	details.						
Pa	rt 3:	List Cer	tain Paym	ents You Ma	ade Before Y	ou Filed for Ba	nkruptcy		
6.	Are eith	er Debtor 1	's or Debtor	2's debts prim	arily consumer	debts?			
	□ No.			-	-	ner debts. Consur		d in 11 U.S.C. § 101(8) as	
		During th	e 90 days be	fore you filed fo	r bankruptcy, did	l you pay any credit	or a total of \$6,425*	or more?	
		□ No. C	Go to line 7.						
		_	total amount	you paid that cr	editor. Do not in	clude payments for	nore in one or more domestic support o attorney for this ban	bligations, such as	
		* Subject	to adjustmer	nt on 4/01/19 an	or bankruptcy, did you pay any creditor a total of \$600 or more?				
	✓ Yes.	Debtor 1	or Debtor 2	or both have p					
	<u>v</u>								
		□ No. (So to line 7.						
		Yes.	List below ea	not include payı	ments for domes		e and the total amou ons, such as child su case.		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
-		II Apartme	ents		_	\$2,553.00		_	
Creditor's name 18081 Midway Rd Number Street			last 90 day: —	s		☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors			
Dalla City	as		TX State	75287 ZIP Code	_			Other Rent	
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
	ital One or's name	Auto Fin	ance		_	\$1,500.00	\$18,274.76	Mortgage	
	3OX 60				last 90 day	s		☑ Car ☐ Credit card	
Numb	er Stre	et			_			Loan repayment	
	a £ le -!	_4		04740	_			Suppliers or vendors	
City	of Indu	stry	CA State	91716 ZIP Code	_			Other	

Deb	tor 1	Shonetta Michelle Bethune	Case number (if known)
7.	Insiders corpora agent, i	1 year before you filed for bankruptcy, did you make a payment on a conclude your relatives; any general partners; relatives of any general partitions of which you are an officer, director, person in control, or owner of 20 ncluding one for a business you operate as a sole proprietor. 11 U.S.C. § a child support and alimony.	ners; partnerships of which you are a general partner; 0% or more of their voting securities; and any managing
	✓ No ☐ Yes	s. List all payments to an insider.	
8.		1 year before you filed for bankruptcy, did you make any payments or ed an insider?	transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	s. List all payments that benefited an insider.	
		_	
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	res
9.	List all	1 year before you filed for bankruptcy, were you a party in any lawsuif such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes.	•
	✓ No	s. Fill in the details.	
10.	seized,	1 year before you filed for bankruptcy, was any of your property reported or levied? all that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,
	ب	Go to line 11. s. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a l ts from your accounts or refuse to make a payment because you owe	·
	✓ No ☐ Yes	s. Fill in the details.	
12.		1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of
	✓ No ☐ Yes	S	

Debtor 1		Shonetta Michelle Bethune			Case numbe		
Р	art 5:	List Cer	tain G	ifts and Coi	ntributions		
13.	Within	2 years befo	re you	filed for bankr	uptcy, did you give any gifts with a total value of m	nore than \$600 per pers	on?
	✓ No	s. Fill in the o	details fo	or each gift.			
14.		2 years before charity?	ore you	filed for bankr	uptcy, did you give any gifts or contributions with	a total value of more tha	an \$600
	☑ No		details fo	or each gift or c	ontribution.		
Р	art 6:	List Cer	tain L	osses			
15.		1 year befor lisaster, or g	-		ptcy or since you filed for bankruptcy, did you lose	e anything because of the	heft, fire,
	✓ No ☐ Yes	s. Fill in the	details.				
Р	art 7:	List Cer	tain P	ayments or	Transfers		
16.	Include No	you consul	Ited abo	out seeking bar	ptcy, did you or anyone else acting on your behalf nkruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services reparers.		
	mand La	aw Firm, PI Vas Paid	LLC		Description and value of any property transferre Attorney fees	d Date payment or transfer was made	Amount of payment
		t Freeway,	Suite 4	401	_	8/18/2018	\$1,650.00
Num	nber Str	reet			-		
Hu City			TX State	76054 ZIP Code	-		
Ema	ail or websi	ite address			-		
Pers	son Who M	Made the Payme	ent, if Not	You	_		
Dec	caf son Who W	Vas Paid			Description and value of any property transferre Credit counseling	d Date payment or transfer was made	Amount of payment
112 Num	2 Goliad nber Str	Street Teet			-	1-23-19	\$25.00
For	rt Worth	1	TX State	76126 ZIP Code	-		
Ema	ail or websi	ite address			-		
Dore	on Who M	Made the Payme	ont if Not	Vou	-		

Deb	tor 1	Shonetta Michelle Bethune	Case number (if known)
17.	anyone	1 year before you filed for bankruptcy, did you or anyone else acting of who promised to help you deal with your creditors or to make paymen	
	Do not i	nclude any payment or transfer that you listed on line 16.	
	✓ No ☐ Yes	. Fill in the details.	
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis y transferred in the ordinary course of your business or financial affair	
		both outright transfers and transfers made as security (such as granting of nclude gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No	. Fill in the details.	
19.	you are	10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No ☐ Yes	. Fill in the details.	
Pá	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	y, any safe deposit box or other depository
	☑ No ☐ Yes	. Fill in the details.	
22.	Have y	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any pr in trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	

Deb	otor 1	5	Shonetta Michelle Bethune Case number (if known)				
Р	art 1	0:	Give Details About Environmental Information				
or	the p	urpo	ose of Part 10, the following definitions apply:				
١	hazar	dous	ental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of s or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, statutes or regulations controlling the cleanup of these substances, wastes, or material.				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
			s <i>material</i> means anything an environmental law defines as a hazardous waste, hazardous substance, toxic s, hazardous material, pollutant, contaminant, or similar item.				
Rep	oort a	ll not	tices, releases, and proceedings that you know about, regardless of when they occurred.				
24.	Has law?	-	governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental				
	سنا	No Yes.	Fill in the details.				
25.		-	u notified any governmental unit of any release of hazardous material?				
			Fill in the details.				
26.	Have	-	u been a party in any judicial or administrative proceeding under any environmental law? Include settlements and				
		No Yes.	Fill in the details.				
Ρ	art 1	1:	Give Details About Your Business or Connections to Any Business				
27.		nin 4 iness	years before you filed for bankruptcy, did you own a business or have any of the following connections to any s?				
			A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation				
	النا		None of the above applies. Go to Part 12.				
	_		Check all that apply above and fill in the details below for each business.				
28.			years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include cial institutions, creditors, or other parties.				
		No Yes.	Fill in the details below.				

Debtor 1	Shonetta Michelle Bethune	Case number (if known)
Part 12	Sign Below	
that answe	ers are true and correct. I understar	ncial Affairs and any attachments, and I declare under penalty of perjury hat making a false statement, concealing property, or obtaining money or y case can result in fines up to \$250,000, or imprisonment for up to 20 years,
X /s/ Sho	onetta Michelle Bethune	x
Shonet	ta Michelle Bethune, Debtor 1	Signature of Debtor 2
Date _	04/07/2019	Date
Did you at	tach additional pages to Your Stater	t of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who is i	an attorney to help you fill out bankruptcy forms?
√ No		
	Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inf	ormation to i	dentify your case:		I	
Debtor 1	Shonetta First Name	Michelle Middle Name	Bethune		
	FIRST Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
			OTDIOT OF TEVAO		
United States Bai	nkruptcy Court to	r the: NORTHERN DI	STRICT OF TEXAS		
Case number (if known)					Check if this is an
]	amended filing
Official Form	100				
Official Form				_	
Statement o	f Intention	for Individuals	Filing Under Chapt	ier 7	12/15
If you are an indiv	idual filing unde	er chapter 7, you must	fill out this form if:		
	_		in out the form in		
		by your property, or			
■ you have lease	ed personal prop	erty and the lease has	not expired.		
		•	er you file your bankruptcy p ds the time for cause. You r	•	
and lessors you li		unless the court exten	us the time for cause. Tou i	nust also senu copies	to the creditors
If two married nec	onle are filing to	nother in a joint case t	ooth are equally responsible	for supplying correct	information
Both debtors mus		-	our are equally responsible	Tor supplying correct	imormation.
Re as complete as	nd accurate as r	nossible If more space	e is needed, attach a separat	a sheet to this form (In the top of any
•		and case number (if k		e sheet to this form. C	on the top of any
Part 1: Lis	t Your Credit	ors Who Hold Sec	ured Claims		
	itors that you lis	ted in Part 1 of <i>Schedu</i>	ule D: Creditors Who Hold C	laims Secured by Prop	perty (Official Form 106D),
Identify the c	reditor and the	property that is collater	ral What do you inten property that secu		Did you claim the property as exempt on Schedule C?
					·
Creditor's name:	Capital One	Auto Finance	Surrender the	property. perty and redeem it.	□ No □ Yes
Description of	2016 Ford E	scano	—	perty and redeem it.	
property	2010 F010 E	.scap e	Reaffirmation	~	
securing debt	:		Retain the pro	perty and [explain]:	
Part 2: Lis	t Your Unexp	ired Personal Prop	perty Leases		
For any unexpired	l naraanal nran	erty loogo that you lists	d in Sahadula C: Evacutory	Contracts and Unavni	red Leases (Official Form 106G),
•			es. <i>Unexpired leases</i> are leas	-	,
yet ended. You m	ay assume an ι	nexpired personal pro	perty lease if the trustee doe	s not assume it. 11 U.	.S.C. § 365(p)(2).
Describe you	r unexpired per	sonal property leases			Will this lease be assumed?
Lessor's name	e: Hunte	r's Hill Apartments			⋈ No
	leased Resid				Yes
property:					_

Debtor 1	Shonetta Michelle Bethune		Case number (if known)
Part 3:	Sign Below		
	penalty of perjury, I declare that I ha al property that is subject to an une	•	ny property of my estate that secures a debt and
X /s/ Sho	onetta Michelle Bethune	X	
Shonet	ta Michelle Bethune, Debtor 1	Signature of Debtor 2	
	04/07/2019 MM / DD / YYYY	Date MM / DD / YYYY	-

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

In	re Shonetta Michelle Bethune	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF A	ATTORNEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that that compensation paid to me within one year before the filing of the peti services rendered or to be rendered on behalf of the debtor(s) in contem is as follows:	ition in bankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$	1,650.00
	Prior to the filing of this statement I have received	\$	1,650.00
	Balance Due		\$0.00
2.	The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4.	✓ I have not agreed to share the above-disclosed compensation with a associates of my law firm.	any other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with anotal associates of my law firm. A copy of the agreement, together with a compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal servi-	ice for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	e debtor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs	and plan which may b	pe required;
	c. Representation of the debtor at the meeting of creditors and confirma	ation hearing, and any	adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Preparation and filing of schedules, statements, other documents not filed with the petition;

Issues that arise that are not specifically listed in the Retainer

Discharge Proceeding brought by client, including those related to IRS debt, student loans or marital debt

Motions for relief, continuation, defense or enforcement of the Automatic Stay

Motions to Redeem Personal Property

Motions to Avoid Liens or Judgments

Other Contested matters, Discovery or Adversary Proceedings

Contested matters involving client's claim of exemptions

Filing any amendments to Clients' Schedules

Motions to continue the 341 meeting of creditors and/or appearing for a continued 341 hearing

Motions or adversary complaints to abandon/refinance/sell/purchase property;

Assisting in carrying out the Debtor's Statement of Intentions;

Monitoring an "asset case"

Re-opening a bankruptcy case to submit post-filing proof of pre-discharge counseling

Defense of Objection to Discharge or Motion to Dismiss Case

Negotiation, review and execution of Reaffirmation Agreement

Appearance at a hearing to prove up a Reaffirmation Agreement

Motions to Assume a contract or lease

Dishonored or Cancelled ACH drafts

Missed or cancelled appointment/meeting Services related to case being selected for audit by the U.S. Trustee's Office

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/07/2019 /s/ Weldon Reed Allmand

Date

Weldon Reed Allmand Allmand Law Firm, PLLC 860 Airport Freeway, Suite 401

Hurst, TX 76054

Phone: (214) 265-0123 / Fax: (214) 265-1979

Bar No. 24027134

Shonetta Michelle Bethune

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Shonetta Michelle Bethune CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

knowl	, and the second se	e attached	list of creditors is true and correct to the best of his/her
Date .	4/7/2019	Signature	/s/ Shonetta Michelle Bethune
			Shonetta Michelle Bethune

Aes/esa Pob 61047 Harrisburg, PA 17106

Allied Interstate LLC P.O. Box 361445 Columbus, OH 43236

Attorney General of Texas Bankruptcy Collection Division PO Box 12017 Austin, TX 78711

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Chase Receivables P.O. Box 659 West Caldwell, NJ 07007-0659

Children's Hospital 1600 7th Avenue South Birmingham, AL 35233

Comcast 3301 W. Royal Lane Irving, TX 75015

Comenitycapital/Big Lot Attn: Bankruptcy Dept PO Box 182125 Columbus, OH 43218

Credit One Bank
ATTN: Bankruptcy Department
PO Box 98873
Las Vegas, NV 89193

FBCS, Inc. 330 S. Warminster Road Suite 353 Hatboro, PA 19040

Hunter's Hill Apartments 18081 Midway Rd Dallas, TX 75287

Internal Revenue Service Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114

LVNV Funding Po Box 10584 Greenville, SC 29603

McKinney Hospital PO Box 4115 Anchorage, AK 99524

Orthopaedic Specialists of Dallas 1005 W, Ralph Hall Parkway, Suite 227 Rockwall, TX 75032

Progressive Finance 11629 South 700 E, Draper, UT 84020 Roseville Community Schools 18975 Church Street Roseville, MI 48066

Sean Bethune 18081 Midway Rd #111 Dallas, TX 75287

State of Michigan Dept. of Treas. Lansing, MI 48909-8274

Synchrony Bank/Walmart Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Texas Alcoholic Beverage Comm Licences and Permits Division P.O. Box 13127 Austin, TX 78711-3127

United States Attorney - NORTH 3rd Floor, 1100 Commerce St. Dallas, TX 75242

US Attorney General US Department of Justice 950 Pennsylvania Ave, NW Washington, DC 20530

US Bank/RMS CC Attn: Bankruptcy PO Box 5229 Cincinnati, OH 45201

Fill in th	is information to i	dentify your case			box only as directent form 122A-1Supp		
Debtor 1	Shonetta First Name	Michelle Middle Name	Bethune Last Name		no presumption of abuse.		
Debtor 2 (Spouse, i	f filing) First Name	Middle Name	Last Name	2. The calcu	lation to determine if a pr applies will be made unde	er Chapter 7	
United Sta	ites Bankruptcy Court fo	r the: NORTHERN D	DISTRICT OF TEXAS		est Calculation (Official Fonts as Test does not apply no		
Case num (if known)	ber				d military service but it co		
				☐ Check if th	is is an amended filing		
Official I	Form 122A-1						
Chapte	r 7 Statement of	Your Current	Monthly Income			12/15	
are exempt military ser	ed from a presumption vice, complete and file p) with this form.	of abuse because yo Statement of Exemp	s, write your name and case i ou do not have primarily cons tion from Presumption of Abu	umer debts or be	cause of qualifying	1	
Part 1:	Calculate Your C	Current Monthly I	ncome				
1. What is	s your marital and filing	g status? Check one	only.				
□ N	ot married. Fill out Colu	mn A, lines 2-11.					
□М	Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.						
☑ Married and your spouse is NOT filing with you. You and your spouse are:							
✓	Living in the same h	ousehold and are no	t legally separated. Fill out bo	th Columns A and	B, lines 2-11.		
	declare under penalty	of perjury that you ar	d. Fill out Column A, lines 2-11 nd your spouse are legally sepa s that do not include evading the	rated under nonba	nkruptcy law that applies	or that you	
bankru August in the r	uptcy case. 11 U.S.C. § 31. If the amount of your esult. Do not include an	§ 101(10A). For examur monthly income vary income amount mor	ed from all sources, derived on ple, if you are filing on Septemblied during the 6 months, add the e than once. For example, if both have nothing to report for any limited from the control of the contr	per 15, the 6-month e income for all 6 oth spouses own the	n period would be March months and divide the tot ne same rental property, p	1 through al by 6. Fill	
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
-	ross wages, salary, tip all payroll deductions).	s, bonuses, overtime	e, and commissions	\$3,609.05	\$0.00		
	ny and maintenance pa mn B is filled in.	yments. Do not inclu	de payments from a spouse	\$0.00	\$0.00		
expens regular		endents, including ch nmarried partner, men		\$0.00	\$0.00		

on line 3.

a spouse only if Column B is not filled in. Do not include payments you listed

Den	Snonetta Michelle Bethu	rie		c	ase number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
5.	Net income from operating a busine	ess, profession, o	r farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses	\$0.00	\$0.00	Сору			
	Net monthly income from a business, profession, or farm	\$0.00	\$0.00	here →	\$0.00	\$0.00	
6.	Net income from rental and other re	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00	\$0.00				
	Ordinary and necessary operating expenses	\$0.00	\$0.00	Сору			
	Net monthly income from rental or other real property	\$0.00	\$0.00	here →	\$0.00	<u>\$0.00</u>	
7.	Interest, dividends, and royalties				\$0.00	\$0.00	
8.	Unemployment compensation				\$0.00	\$0.00	
	Do not enter the amount if you content benefit under the Social Security Act.						
	For you		\$0.0	00			
	For your spouse		\$0.0	00_			
9.	Pension or retirement income. Do r was a benefit under the Social Security		ount received that		\$0.00	\$0.00	
10.	Income from all other sources not li amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorism. separate page and put the total below	received under the war crime, a crime If necessary, list o	Social Security Ace against humanity	ct ,			
	Total amounts from separate pages, i	f any.		+		+	
11.	Calculate your total current monthly Add lines 2 through 10 for each column. Then add the total for Column A to the	nn.	3.		\$3,609.05	+ \$0.00	\$3,609.05 Total current
							monthly income

Debtor 1		s	honetta Michelle Bethune		Case number (if known)			
P	art 2		Determine Whether the Means T	est Applies to You				
12.	Calc	ulate	your current monthly income for the yo	ear. Follow these steps:				
	12a.	Cop	by your total current monthly income from	line 11	Copy line 11 here > 12a. \$3,609.05			
		Mul	tiply by 12 (the number of months in a yea	ar).	X 12			
	12b.	The	e result is your annual income for this part	of the form.	12b. \$43,308.60			
13.	Calc	ulate	the median family income that applies	to you. Follow these steps:				
	Fill ir	n the s	state in which you live.	Texas				
	Fill ir	n the r	number of people in your household.	2				
	Fill ir	n the r	median family income for your state and s	13. \$65,429.00				
			ist of applicable median income amounts, is for this form. This list may also be avai					
14. How do the lines compare?								
14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no Go to Part 3.				ox 1, There is no presumption of abuse.				
14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by F</i> Go to Part 3 and fill out Form 122A-2.					presumption of abuse is determined by Form 122A-2.			
P	art 3		Sign Below					
	Bv	sianir	ng here. I declare under penalty of periury	that the information on this sta	tement and in any attachments is true and correct.			
	·	•						
		$\overline{}$	etta Michelle Bethune etta Michelle Bethune, Debtor 1	X Signa	ture of Debtor 2			
		Date	4/7/2019	Date_				
		_	MM / DD / YYYY		MM / DD / YYYY			
	If y	ou ch	ecked line 14a, do NOT fill out or file Forr	n 122A-2.				

Official Form 122A-1

If you checked line 14b, fill out Form 122A-2 and file it with this form.